

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 10668907

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2						
3	/					
4						
5	/					
6						
7						
8						
9						
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11						
12	/					
13						
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36	/					
37	/					
38	/					
39						
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41						
42	/					
43						
44						
45						
46						
47	/					
48						
49		(1)				
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51	/					
52						
53						
54						
55						
56	/					
57						
58						
59						
60						
61	/					
62	/					
63	/					
64	/					
65	/					
66	/					
67	/					
68	/					
69	/					
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89						
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92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	8					
TOTAL DEP.	25					
TOTAL CLAIMS	30					